



Scootaround PRN Application Form

Please complete in full and fax to: **(204) 478-1172**

CONTACT INFORMATION

Travel Agent and Company Name

--	--

Name of Travel Agent

E-mail Address

--	--

Company Name

Website Address

Phone Numbers

--	--	--	--

Daytime Phone

Evening Phone

Cellular Phone

Fax

Associations (If you are a member)

--

e.g. UFTAA, ITAA)

PAYMENT CONTACT INFORMATION

Make Checks Payable to:

--

Full Name

Mail Invoice to: Home [] Business [] Other []

--	--	--	--

Street and Number

City

State

Zip Code

Need more information?

If you have any questions about this application form, please contact **Scootaround** at **888-441-7575**.